

**BD-STEPS  
TELEPHONE SCRIPTS**

**Medical Record Request Reminder Call 1 to Case or Control Mother**

Timing: 14 days after Date of Medical Record Request Mailing

**Medical Record Reminder Call A to Mother**

Hello, may I speak to <Mother>? This is <Interviewer> calling for the Birth Defects Study To Evaluate Pregnancy exposureS or BD-STEPS. <Mother>, recently we sent you a medical records release authorization form. Did you receive that?

**NO** [VERIFY ADDRESS. DESCRIBE FORM, PROBE AS APPROPRIATE.]  
If it's all right, I'll send you another form. If you have any questions about this form, you may call our toll-free number 1-888-743-7324. We'd be happy to "walk you through" filling out the form for <medical/dental> record release.

**YES** I am calling today to find out if you have any questions or problems with completing the <medical/dental> record release form. I'd be happy to answer any questions that you have, or to "walk you through" filling out this form. Do you have any questions?

**IF REFUSAL: DO NOT ASK OR PROBE FOR REASONS.**  
RECORD REASON FOR REFUSALS ONLY IF THE SUBJECT OFFERS THIS INFORMATION.

**Thank you.**

**MESSAGE FOR SUBJECT'S ANSWERING MACHINE:**

"We're calling <SUBJECT'S FIRST/LAST NAME> to see if you received the form to we sent you in the mail. You may call us at our toll-free number, 1-888-743-7324 with any questions. We'll also try calling you again."

**MESSAGE LEFT WITH ANOTHER PERSON:**

"We're calling <SUBJECT'S FIRST/LAST NAME> to see if she received the consent form we sent her in the mail. She may call us at our toll-free number 1-888-743-7324 with any questions. We'll also try calling her again. (When would be a good time to reach her?)"

## **BD-STEPS**

### **TELEPHONE SCRIPTS**

#### **Medical Record Request Reminder Call 2 to Case or Control Mother**

Timing: 14 days after Date of “Completed” First Medical Record Request Reminder Call (or Letter)

#### **Medical Record Request Reminder Call B to Mother**

Hello, may I speak to <Mother>? This is <Interviewer> calling for the Birth Defects Study To Evaluate Pregnancy exposureS or BD-STEPS. <Mother>, I have recently reviewed our records and noticed that we sent a medical records release authorization form to you on <Date Sent>. Did you receive that? We have not received a completed form, and I am calling today to find out if you had any questions. Also, I'd be happy to “walk you through” the form that we're asking you to complete.

#### **NO (NOT RECEIVE REQUEST OR NO QUESTIONS):**

VERIFY ADDRESS. DESCRIBE REQUEST, CAN REMAIL]

When could we expect to receive your completed form?

If you have any questions about how to complete the form, you may call our toll-free number (1-888-743-7324).

**YES** When could we expect to receive the medical records release authorization form?

If you have any questions about how to complete the form, you may call our toll-free number 1-888-743-7324.

#### **IF REFUSAL: DO NOT ASK OR PROBE FOR REASONS.**

RECORD REASON FOR REFUSALS ONLY IF THE SUBJECT OFFERS THIS INFORMATION.

**Thank you.**

#### **MESSAGE FOR SUBJECT'S ANSWERING MACHINE:**

“We're calling <SUBJECT'S FIRST/LAST NAME> to see if you received the form that we sent in the mail. You may call us at our toll-free number, <1-888-743-7324> with any questions. We'll also try calling you again.”

#### **MESSAGE LEFT WITH ANOTHER PERSON:**

“We're calling <SUBJECT'S FIRST/LAST NAME> to see if she received form we sent her in the mail. She may call us at our toll-free number <1-888-743-7324>. with any questions. We'll also try calling her again. (When would be a good time to reach her?)”

**BIRTH DEFECTS STUDY TO EVALUATE PREGNANCY EXPOSURES (BD-STEPS)**

**ADDRESS CORRECTION FORM FOR MEDICAL RECORD REQUEST FOLLOW-UP CALLS**

USE FOLLOWING FOR NOTES. THEN, RECORD UPDATE INFORMATION IN TRACKING SYSTEM.

**CORRECTED ADDRESS—MOTHER:**

STREET: \_\_\_\_\_

APARTMENT: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

\_\_\_ **MOTHER REFUSED MEDICAL RECORD REQUEST**

REASON (IF OFFERED): \_\_\_\_\_